

91614-55

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		
O.I.P.E. CLASSIFIER	<i>[Signature]</i>		
FORMALITY REVIEW	<i>[Signature]</i>	JL-916	10/10/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
—	(Through numeral)... Canceled	A	..... Appeal
+	..... Restricted	O	..... Objected

Claim	Final	Original	Date
1		1	
2		14	
3		61	
4		7	
5		10	
6		13	
7		15	
8		2000	
9		2000	
10		2000	
11		2000	
12		2000	
13	✓	✓	✓
14	✓	✓	✓
15	✓	✓	✓
16	✓	✓	✓
17	✓	✓	✓
18	✓	✓	✓
19	✓	✓	✓
20	✓	✓	✓
21	✓	✓	✓
22	0	0	✓
23	0	0	✓
24	✓	✓	✓
25	✓	✓	✓
26	✓	✓	✓
27	✓	✓	✓
28	✓	✓	✓
29	✓	✓	✓
30	0	0	✓
31	✓	✓	✓
32	✓	✓	✓
33	✓	✓	✓
34	0	0	✓
35	✓	✓	✓
36	✓	✓	✓
37	✓	✓	✓
38	✓	✓	✓
39	✓	✓	✓
40	✓	✓	✓
41	✓	✓	✓
42	0	0	✓
43	0	0	✓
44	✓	✓	✓
45	✓	✓	✓
46	0	0	✓
47	0	0	✓
48	0	0	✓
49	0	0	✓
50	0	0	✓
51	0	0	✓
52	0	0	✓
53	0	0	✓
54	0	0	✓
55	0	0	✓
56	0	0	✓
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68	0	0	✓
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91	0	0	✓
92	0	0	✓
93	0	0	✓
94	0	0	✓
95	0	0	✓
96	0	0	✓
97	0	0	✓
98	0	0	✓
99	0	0	✓
100	0	0	✓

Claim	Date					
Final	Original	1	7	10	4	8
1	✓	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓	✓
6	✓	✓	✓	✓	✓	✓
7	✓	✓	✓	✓	✓	✓
8	✓	✓	✓	✓	✓	✓
9	✓	✓	✓	✓	✓	✓
10	✓	✓	✓	✓	✓	✓
11	✓	✓	✓	✓	✓	✓
12	✓	✓	✓	✓	✓	✓
13	✓	✓	✓	✓	✓	✓
14	✓	✓	✓	✓	✓	✓
15	✓	✓	✓	✓	✓	✓
16	✓	✓	✓	✓	✓	✓
17	✓	✓	✓	✓	✓	✓
18	✓	✓	✓	✓	✓	✓
19	✓	✓	✓	✓	✓	✓
20	✓	✓	✓	✓	✓	✓
21	✓	✓	✓	✓	✓	✓
22	✓	✓	✓	✓	✓	✓
23	✓	✓	✓	✓	✓	✓
24	✓	✓	✓	✓	✓	✓
25	✓	✓	✓	✓	✓	✓
26	✓	✓	✓	✓	✓	✓
27	✓	✓	✓	✓	✓	✓
28	✓	✓	✓	✓	✓	✓
29	✓	✓	✓	✓	✓	✓
30	✓	✓	✓	✓	✓	✓
31	✓	✓	✓	✓	✓	✓
32	✓	✓	✓	✓	✓	✓
33	✓	✓	✓	✓	✓	✓
34	✓	✓	✓	✓	✓	✓
35	✓	✓	✓	✓	✓	✓
36	✓	✓	✓	✓	✓	✓
37	✓	✓	✓	✓	✓	✓
38	✓	✓	✓	✓	✓	✓
39	✓	✓	✓	✓	✓	✓
40	✓	✓	✓	✓	✓	✓
41	✓	✓	✓	✓	✓	✓
42	✓	✓	✓	✓	✓	✓
43	✓	✓	✓	✓	✓	✓
44	✓	✓	✓	✓	✓	✓
45	✓	✓	✓	✓	✓	✓
46	✓	✓	✓	✓	✓	✓
47	✓	✓	✓	✓	✓	✓
48	✓	✓	✓	✓	✓	✓
49	✓	✓	✓	✓	✓	✓
50	✓	✓	✓	✓	✓	✓
51	✓	✓	✓	✓	✓	✓
52	✓	✓	✓	✓	✓	✓
53	✓	✓	✓	✓	✓	✓
54	✓	✓	✓	✓	✓	✓
55	✓	✓	✓	✓	✓	✓
56	✓	✓	✓	✓	✓	✓
57	✓	✓	✓	✓	✓	✓
58	✓	✓	✓	✓	✓	✓
59	✓	✓	✓	✓	✓	✓
60	✓	✓	✓	✓	✓	✓
61	✓	✓	✓	✓	✓	✓
62	✓	✓	✓	✓	✓	✓
63	✓	✓	✓	✓	✓	✓
64	✓	✓	✓	✓	✓	✓
65	✓	✓	✓	✓	✓	✓
66	✓	✓	✓	✓	✓	✓
67	✓	✓	✓	✓	✓	✓
68	✓	✓	✓	✓	✓	✓
69	✓	✓	✓	✓	✓	✓
70	✓	✓	✓	✓	✓	✓
71	✓					

Claim		Date					
Final	Original						
	101						
	102						
	103						
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**If more than 150 claims or 10 actions  
staple additional sheet here**

(LEFT INSIDE)